

Withdrawal from Academic Course

Your Name
Your Address
City, State, Zip Code
Email Address
Phone Number
Date

[Registrar's Office/Department Name]
[University Name]
[University Address]
City, State, Zip Code

Dear [Registrar's/Professor's Name],

I am writing to formally withdraw from the [Course Name] (Course Code) for the [semester/term] of [Year]. Due to [brief explanation of your reason, if comfortable, e.g., personal, health, or academic circumstances], I believe this decision is in my best interest.

I appreciate the knowledge I gained in this course and apologize for any inconvenience my withdrawal may cause. Please let me know if there are any formal procedures I need to complete for this withdrawal.

Thank you for your understanding.

Sincerely,
[Your Name]
Student ID: [Your Student ID]